

YOUTH PROGRAMS PARTICIPANT INFORMATION FORM

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HH#

Program/School	Grade	Date of Birth	
Participant Name		Age	
Address	Apt#	Zip Code	Phone
Parent/Guardian #1		Cell Phone	
Work Location		Work Phone	
Parent/Guardian #2		Cell Phone	
Work Location		Work Phone	
E-Mail Address		<div><div>SUMMER ONLY</div><div>Swimmer <input type="checkbox"/> Non-Swimmer <input type="checkbox"/> Intermediate <input type="checkbox"/> Beginner <input type="checkbox"/> Advanced</div></div>	

EMERGENCY CONTACT (someone other than parent/guardian):

I understand that it is my responsibility to provide current phone numbers and addresses.

Relationship: Phone:

Relationship: Phone:

MY CHILD MAY BE PICKED UP BY (someone other than parent/guardian):

Relationship: Phone:

Relationship: Phone:

MEDICATION: ☐ NO ☐ YES (If yes, please fill out additional form and attach photo.)

ALLERGIES OR SPECIAL NEEDS:

FEES: I understand that all fees/payments are due Fridays by 6 p.m. PST for seasonal camps. Payment may be made in cash (at select locations), money order, credit card (MC, VISA and DISCOVER), debit card or check accompanied by a driver's license. Payments will only be accepted from adults listed on this form.

Initial

LATE PICK-UP FEE: I understand that if my child is not picked up by the program end time, a late fee of \$10.00 will be charged for every 10 minute increment beginning after the site program end time.

Initial

ABSENTEEISM: I understand that no credit is given when a child is absent from the program.

Initial

SIGN-IN/SIGN-OUT: I understand that each child must be signed in and/or out daily. The only person(s) authorized to pick up the child are those listed on this form and a photo ID must be shown daily.

Initial

PARENT HANDBOOK: I have received and will read and understand the policies and procedures outlined in the parent handbook.

Initial

REFUND POLICY: Please refer to the parent handbook for refund policy information or speak with a staff member.

Initial

PHOTO POLICY: During City-sponsored programs and events, City Staff may take photos of participants that may be used in professionally-designed City publications and promotional materials. Please ask staff for full policy.

Initial

RELEASE OF LIABILITY AND INDEMNIFICATION

As a condition to being granted access to any facility owned by the city of Las Vegas, and authorization to participate in any event or program, including, without limitation, any class, tournament, special event or other activity administered or sponsored by the DEPARTMENT OF PARKS AND RECREATION of the City, the undersigned, by signing below at the appropriate signature line, acting either (i) for himself or herself as a participant ("Participant") in an event or program administered or sponsored by the Department of Parks and Recreation, or (ii) as the parent or legal guardian of the Participant on behalf of the Participant, and in either case acting as the representative of the heirs and of the executor or administrator of the estate of the Participant, hereby now and forever, waives and releases the city of Las Vegas, its officers, employees, agents and representatives, from any and all liability for personal injuries and/or property damage sustained or suffered by the Participant as a result or consequence of the Participant participating in any of the aforementioned events or programs. In addition to the waiver and release set forth herein, the undersigned, as the Participant, or as the parent or legal guardian of the Participant, agrees to defend, indemnify and hold the City, its officers, employees, agents and representatives, harmless from any and all claims, demands, suits, judgments, awards or any other form of liability for personal injuries and/or property damage, which is the result of the Participant's negligent act or omission in connection with the Participant's participation in any of the aforementioned events or programs administered or sponsored by the Department of Parks and Recreation, or use of any facility owned by the city of Las Vegas in connection therewith.

PARENT OR LEGAL GUARDIAN

Print Name: _____

Signature: _____

Relationship: _____ Date: _____